

Maine WIC Nutrition Program

11 State House Station Augusta, Maine 04333 207-287-3991 or 1-800-437-9300 TTY Users: Dial 711

Fax: 207-287-3993

Refusal of Hematological Screening

I refuse to have a hematological screen comple	
	(Applicant/Participant Name)
by the(Local Agency Name)	WIC Program as a means for determining
WIC Program eligibility as required by federa	al regulations (USDA 7 CFR Part. 246.7 e,1.).
Reason for Refusal:	
Signature:(Participant/Parent/Guardian)	Date:
Signature:(WIC Staff Member)	
USDA Non-Discrimination Statement	
policies, the USDA, its Agencies, offices, and employee programs are prohibited from discriminating based on retaliation for prior civil rights activity in any program of the Persons with disabilities who require alternative mean large print, audiotape, American Sign Language, etc.), applied for benefits. Individuals who are deaf, hard of	s of communication for program information (e.g. Braille, should contact the Agency (State or local) where they
3027) found online at: http://www.ascr.usda.gov/com	te the <u>USDA Program Discrimination Complaint Form</u> , (AD- plaint filing cust.html, and at any USDA office, or write a of the information requested in the form. To request a copy our completed form or letter to USDA by:
(1) Mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW	(2) Fax: (202) 690-7442; or (3) Email: program.intake@usda.gov

Appendix CE-3-B Revised: 10/01/2018